CORRECTED FISCAL NOTE

HB 244 - SB 867

April 12, 2007

SUMMARY OF BILL: Requires the TennCare program to cover inpatient rehabilitation facility services when alternative services will likely be as costly.

ESTIMATED FISCAL IMPACT:

On March 26, 2007, we issued a fiscal note on this bill indicating *a not* significant increase to state expenditures. Based on additional information received from the Bureau of TennCare, the fiscal impact of the bill is as follows:

(Corrected)

Increase State Expenditures - \$ 4,356,600 Increase Federal Expenditures - \$ 7,643,400

Assumptions:

- According to the Bureau of TennCare, managed care organizations (MCOs) currently may choose to pay for in-patient rehabilitation services only if such services are a cost effective alternative step-down from inpatient hospital care, but such services are not a mandatory covered service under the program and are not available as an alternative to home care.
- Listing in-patient rehabilitation as a covered service may require the Bureau to reimburse MCOs for providing such care in cases where athome care is deemed not to be an adequate alternative and may create grounds for appeal of denial of services. Currently, in-patient stays including rehabilitation services cost the TennCare program approximately \$12,000,000 per year in combined state and federal funds. The Bureau estimates that this cost will at least double as a result of this additional coverage option. Of this amount, \$4,356,600 will be state funds and \$7,643,400 will be federal funds at a 63.695% match rate.
- The Bureau of TennCare will not incur a significant increase in state expenditures to seek a State Plan Amendment from the Centers for Medicare and Medicaid Services. Any increase can be absorbed within existing resources of the Bureau.

HB 244 - SB 867 (CORRECTED)

CERTIFICATION:

This is to duly certify that the information contained herein is true and correct to the best of my knowledge.

James W. White, Executive Director